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PTO/SB/21 (08-03)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	<b>Application Number</b>	10/040,538	
	<b>Filing Date</b>	December 28, 2001	
	<b>First Named Inventor</b>	Stephen D. Pacetti	
	<b>Group Art Unit</b>	1762	
	<b>Examiner Name</b>	Jennifer K. Michener	
<b>Total Number of Pages in This Submission (excluding references)</b>	2	<b>Attorney Docket Number</b>	50623.149

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization <input checked="" type="checkbox"/> Postage Paid Return Postcard <input checked="" type="checkbox"/> Response to Restriction Requirement (1 page) <input type="checkbox"/> Amendment Transmittal Letter (in duplicate) <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Petition for Extension of Time (___ month) (in duplicate) <input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 and ___ References <input checked="" type="checkbox"/> Express Mail Label No. EV 337 973 674 US <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) In/Formal ___ Sheets with Submission of Drawings Transmittal <input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) <input type="checkbox"/> Request for Continued Examination Transmittal (RCE) <input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Request for Status of Application <input type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Cameron K. Kerrigan Reg. No. 44,826
Signature	
Date	March 24, 2004

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail # EV 337 973 674 US in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: March 24, 2004			
Typed or printed name	Rebecca M. Klits		
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:  
Stephen D. Pacetti et al.

Examiner: Jennifer K. Michener

Serial No.: 10/040,538

Art Unit: 1762

Filed: December 28, 2001

Title: A System And Method For Coating Implantable Devices

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Commissioner for Patents  
USPTO  
PO Box 1450  
Alexandria, VA 22313-1450

**RESPONSE TO RESTRICTION REQUIREMENT**

Dear Examiner Michener:

In response to the Restriction Requirement mailed on March 4, 2004, Applicants elect Group I, Claims 1-7 and 9-26. This election is being made without traverse.

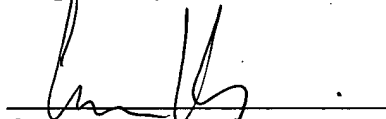
The undersigned authorizes any fees that may be required, or credit of any overpayment to be made to Deposit Account No. 07-1850.

Should the Examiner have any questions regarding this communication, the Examiner is invited to contact the undersigned at the telephone number shown below.

Date: March 24, 2004

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Respectfully submitted,

  
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